

Presentation of the Claims:

This listing of the claims will replace all prior versions and listings of claims in the application:

1. (Currently amended) A method of detecting a bio-emergency, the method comprising:
receiving patient health information at a plurality of health care facilities, the information being received at each facility via a user interface executed on at least one computer; and
transmitting, simultaneously with said receiving step, the patient health information to a monitoring computer within a bio-surveillance network; and
compiling the patient health information on the monitoring computer to create compiled health data.
2. (Original) The method of claim 1, wherein the bio-surveillance network includes at least one regional repository that communicates directly with at least one of the health care facilities.
3. (Original) The method of claim 2, wherein the regional repository is a state health department.
4. (Original) The method of claim 2, wherein the at least one regional repository includes a plurality of regional repositories.
5. (Original) The method of claim 4, wherein said compiling step is performed at the regional repositories.
6. (Original) The method of claim 5, further comprising communicating the compiled health data to at least one group including the regional repositories and a centralized recipient.
7. (Original) The method of claim 5, wherein the bio-surveillance network includes a centralized recipient that receives the compiled health care data from at least one of the regional repositories.

8. (Original) The method of claim 7, further comprising comparing the compiled health data to a threshold.
9. (Original) The method of claim 8, further comprising generating a warning signal in response to said comparing step.
10. (Original) The method of claim 9, further comprising communicating the warning signal to at least one of a group including the health care facilities, a law enforcement agency, a health department, and a hospital network.
11. (Original) The method of claim 10, wherein said communicating the warning signal is performed automatically in response to said comparing step.
12. (Original) The method of claim 7, wherein the centralized recipient is the Centers for Disease Control (CDC).
13. (Original) The method of claim 1, wherein the patient health information includes triage information.
14. (Original) The method of claim 13, wherein the triage information includes symptom information.
15. (Original) The method of claim 14, wherein the triage information includes a primary complaint.
16. (Original) The method of claim 15, wherein the triage information includes a secondary complaint.
17. (Original) The method of claim 14, further comprising categorizing the symptom information.

18. (Original) The method of claim 1, wherein said categorizing step includes generating syndromic data.
19. (Original) The method of claim 1, wherein said receiving step is performed using proprietary software.
20. (Original) The method of claim 1, wherein said transmitting step is implemented via an Internet.
21. (Original) A method of detecting a bio-emergency, the method comprising:
 - receiving individual triage patient health information at a plurality of health care facilities from each of a plurality of patients;
 - on a patient-by-patient basis, electronically recording triage data for that patient in a computer of the associated health care facility, the triage data for each patient containing at least some of the received health information for that patient;
 - upon recording the triage data for each patient, transmitting at least a portion of the recorded triage data to a computer for one of a plurality of regional repositories automatically and in at least near real-time, the computer for each of the regional repositories receiving triage data from a computer for each of a plurality of the health care facilities;
 - transmitting triage data to a computer for a centralized recipient from the computers for regional repositories automatically and in at least near real time with its receipt from the computers for the health care facilities;
 - analyzing the triage data and determining, based on the analysis, whether a possible bio-emergency exists;
 - communicating, from the centralized recipient, information regarding the possible bio-emergency to at least one of one or more of the regional repositories, one or more of the health care facilities, and other institutions having an interest in responding to a possible bio-emergency.
22. (Original) The method as recited in claim 21, further comprising
 - compiling the triage data for individual patients to generate volumetric triage data (VTD);
 - comparing the volumetric triage data with a predetermined threshold; and
 - transmitting a warning in response to said comparing step.

23. (Original) The method as recited in claim 22, wherein the compiling step is performed by the computer for the regional repositories, and the comparing step is performed by the computer for the centralized recipient.

24. (Withdrawn) A method of compiling medical information;
receiving individual patient health information at a plurality of health care facilities from each of a plurality of patients;

on a patient-by-patient basis, electronically recording data for that patient in a computer for the associated health care facility, the data for each patient containing at least some of the received health information for that patient;

upon recording the data for each patient, transmitting at least a portion of the recorded data to a computer for one of a plurality of regional repositories automatically in at least near real-time, the computer for each of the regional repositories receiving triage data from a plurality of the health care facilities; and

transmitting data to a computer for a centralized recipient from the computers for the regional repositories, the data being derived from or comprising the data received from computers for the health care facilities and being transmitted automatically and in at least near real-time with its receipt from the health care facilities.

25. (Withdrawn) The method as recited in claim 24, wherein the data is triage data obtained upon initial examination of each patient, and further comprising:

analyzing the triage data and determining, based on the analysis, whether a possible bio-emergency exists,

communicating, from the centralized recipient, information regarding the possible bio-emergency to at least one of one or more of the regional repositories, one or more of the health care facilities, and other institutions having an interest in responding to a possible bio-emergency.

26. (Withdrawn) The method as recited in claim 24, wherein the data is syndromic data, and further comprising using computers for at least one of the regional repositories and the centralized recipient, compiling the syndromic data; and disseminating information regarding the compiled syndromic data.